



Cobb County Parks Recreation & Cultural Affairs Department

ADULT SOFTBALL REGISTRATION PACKET *2012 Spring/Summer*

Walk-in Registration

Parks, Recreation & Cultural Affairs Administrative office
1792 County Services Pkwy., Marietta, GA 30008

RETURNING TEAMS: *(Teams that participated in a 2011 spring/summer league)*

TUESDAY FEBRUARY 21 6:00 PM TO 8:00 PM

NEW TEAMS: *(Teams that did not participate in a 2011 spring/summer league)*

THURSDAY FEBRUARY 23 6:00 PM TO 8:00 PM

- **NEW TEAMS MUST REGISTER IN PERSON**
- The cost is **\$400 for a 10-game season**
- ONE team check or money order should be made payable to **CCPRCAD** (Cobb Parks, Recreation & Cultural Affairs Department). We also accept VISA and MASTERCARD payments. Cash payments must be in exact amount

↓ RETURNING TEAMS – Early Registration Options ↓

ON-LINE REGISTRATION

- Early on-line registration opens **February 1st** at <http://www.prca.cobbcountyga.gov>
- Must be a returning team from the **SPRING 2011** leagues (FALL teams are not considered returning)
- Must be registering for the same park and league. Transferring teams must come in to register
- Must pay by either **Visa or MasterCard**. Those wishing to pay by check must come in to register

Please contact your league coordinator to get your required PIN # and Log-in ID.

MAIL-IN REGISTRATION

- Only teams that played in the **SPRING 2011** leagues are considered returning teams
- Must be registering for the same park and league (Transferring teams must come in to register)

Mail to: ****All mailed entries must be received by February 20, 2012***

CCPRCAD
Adult Athletics
1792 County Services Pkwy
Marietta, Ga. 30008

MAIL-IN CHECK LIST

- ✓ Entry Form – Filled out in its entirety including the manager and assistant managers requested contact information.
- ✓ Check or Money Order payable to CCPRCAD (\$400.00). Payment must accompany the registration form.
- ✓ Drivers License number on the check.

IMPORTANT INFORMATION

Registration

The **total registration fee** is due at time of registration, partial payments will not be accepted and due to county policy no checks may be held. If for any reason your team is not accepted a full refund will be made immediately.

Make **checks payable to CCPRCAD** (Cobb County Parks, Recreation and Cultural Affairs Department). Checks returned unpaid by the bank will be charged a \$35.00 fee. We also accept VISA and MasterCard.

The **enclosed entry form** must be filled out COMPLETELY and turned in at the time of registration. The team's roster must be submitted by the first game of the season.

Returning teams that fail to register prior to the new team registration date will lose their guaranteed spot in the league.

League and/or location transfers will be handled on a first-come, first-served basis.

Schedule conflicts must be submitted at registration. We do not guarantee that all conflict requests will be honored.

A \$200 **non-residency fee** will be charged to any team that does not meet the residency requirements. (75% of players reside in, or team sponsored by a business located in, Cobb County.)

Season

LEAGUE PLAY – Monday through Thursday night leagues begin the week of **March 26**.
Friday night leagues will start on March 23rd.

GAME TIMES – Games will be scheduled to begin as early as 6:30 p.m. and as late as 9:30 p.m. The number of teams in each league will determine start time.

PRACTICE – Teams may sign up for 1 hour practice slots during registration for the week proceeding the season start date.

GENERAL INFORMATION - The Department will furnish softballs, umpires and scorekeepers for all games. Each team must furnish its own numbered shirts, gloves and bats.

ADA - It is the intent of Cobb County Government to comply with the Americans with Disabilities Act. If you or anyone on your team has a specific physical or service accessibility need please make our staff aware so that we may make a reasonable effort to accommodate your needs.

ONLINE REGISTRATION INSTRUCTIONS

(For returning spring league teams only)

To register your team online you must have a Login ID # and Pin #. Contact your league coordinator if you have not already received these numbers. Early online registration will open **February 1** but you must register for the same league that you played spring/summer 2011.

Please have the following information ready when registering:

1. Log-in ID #, PIN #, and League Barcode
2. Visa or Master Card # and expiration date

How to register:

1. Go to our department website at <http://www.prca.cobbcountyga.gov>
2. Click on the **Online Registration** web link on the side bar
3. Click on the activities tab
4. Type in the league code in the barcode box or select desired search criteria from the pull down menu.
5. Select the desired activity or return to the search page
6. Click ADD to put the league into your basket (the first time you do this, you will be asked to enter your client code and Account PIN)
7. Select the team you wish to register and press the UPDATE MY BASKET button
8. Go to the CHECK OUT button to pay for your team
9. Review the charges and enter payment information as required. Press the complete transaction button.
10. For your confirmation, please print the "registration was successful" page.

Please fax entry form to your league coordinator.

Fax numbers:

- Bishop Complex: 770.528.8887
- Kennworth: 770.528.8898
- Nickajack: 770.528.8814
- Bells Ferry & Terrell Mill: 770.591.3163

LEAGUE GUIDELINES

CHURCH LEAGUE - The roster must be made up of individuals who are active members or minister approved regular attendees of the church or an organization of the church which they represent other than an athletic team. A player must be 16 years old to be eligible for church teams.

OPEN LEAGUE - The roster is not restricted to individuals who work or attend church together and is open to any group of individuals. A player must be 16 years old to be eligible for open teams.

COED LEAGUE - Same requirements as open league teams on roster and age. In coed play at least 50% of the players on the field must be females at all times.

DIVISIONS - Denotations of Major, Competitive and Recreation indicate relative strengths of the leagues at a given location. The Unlimited league has an unlimited home run rule, Major has a 5 home run limit, Competitive has a 3 home limit and Recreation is a 1 home run rule. Excess home runs are ruled as outs in the Major and Competitive divisions, and as inning-ending outs in the Recreation division.

DETERMINATION OF RESIDENCY FOR COBB COUNTY TEAMS
(APPLIES TO ALL TEAMS)

OPEN LEAGUE - The team roster must be 75% Cobb County residents. A resident shall be defined as a person that lives in, or attends school full-time in Cobb County. If the team sponsor is located within Cobb County, then the team is considered a resident team.

CHURCH LEAGUE - The church should be located in Cobb County; if the church is located outside of the boundaries of Cobb County, then 75% of the participants on the church roster must live or attend school full-time in Cobb County.

PLAYERS ON ROSTER REQUIREMENT	NUMBER OF COBB COUNTY PLAYERS NECESSARY TO MEET MINIMUM
8 -----	6
9 -----	7
10 -----	8
11 -----	9
12 -----	9
13 -----	10
14 -----	11
15 -----	12
16 -----	12
17 -----	13
18 -----	14
19 -----	15
20 -----	15
21 -----	16
22 -----	16
23 -----	17
24 -----	18
25 -----	19

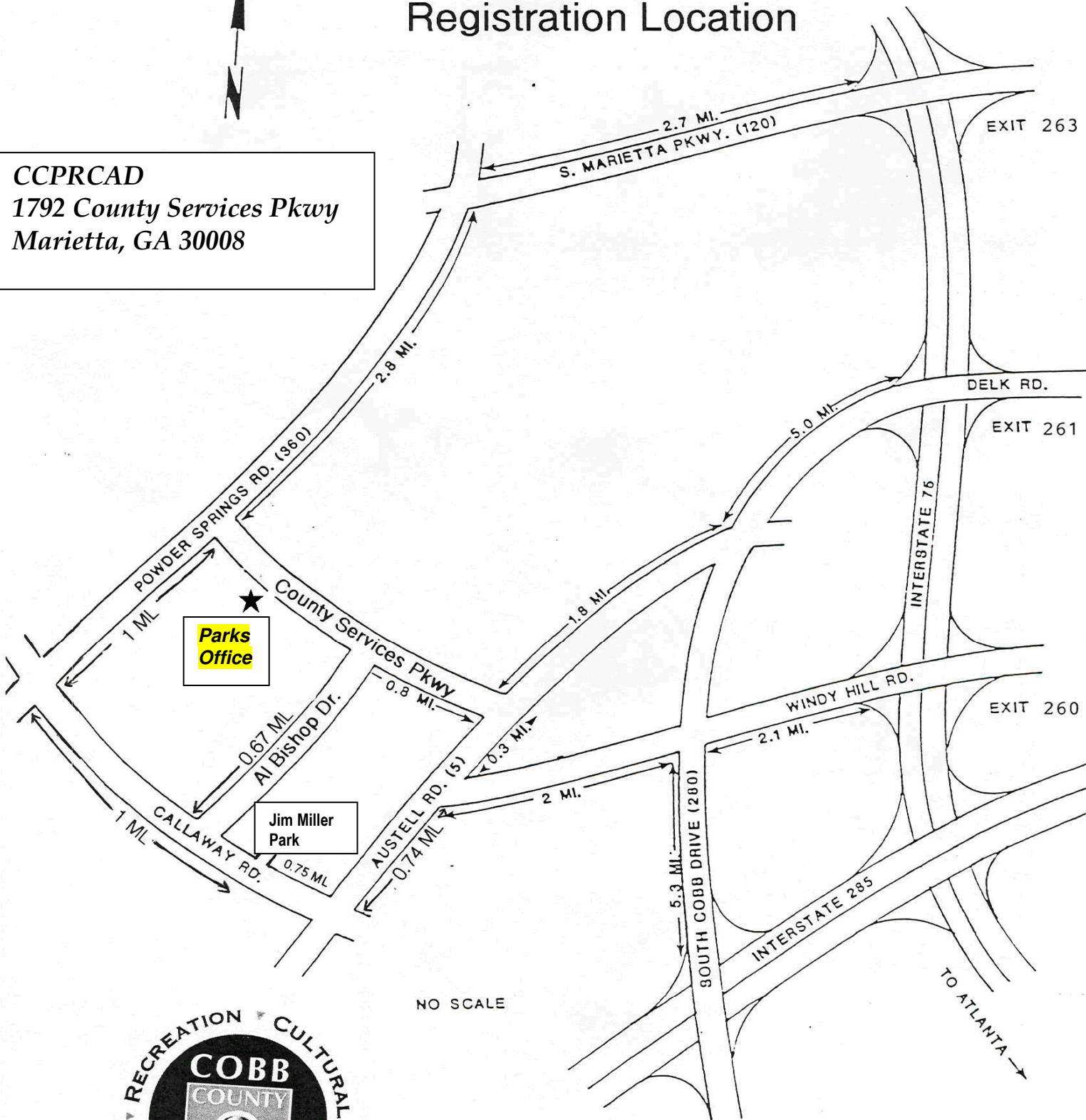
NOTE:

A \$200.00 PER TEAM NON-RESIDENCY FEE WILL BE ADDED TO ALL TEAMS THAT DO NOT MEET THE 75% RESIDENCY REQUIREMENT.

Registration Location

CCPRCAD

**1792 County Services Pkwy
Marietta, GA 30008**



2012 ADULT SOFTBALL LEAGUE OFFERINGS:

(ALL LEAGUES WILL HAVE A **MINIMUM** OF 6 TEAMS AND WILL PLAY A 10 GAME SCHEDULE)

BISHOP COMPLEX 770-528-8860 Coordinator – Brooks Tinsley Brooks.tinsley@cobbcounty.org			BELLS FERRY 770-591-3160 Coordinator – Michael Gates Michael.gates@cobbcounty.org		
	BARCODE	DAYS PLAYED		BARCODE	DAYS PLAYED
MEN'S REC RED (1 HR)	52125	MON, WED	MEN'S COMP (3 HR))	51877	MONDAY
MEN'S COMP RED (3 HR)	52126	MON, WED	COED COMP (3 HR)	51878	TUESDAY
MEN'S COMP BLUE (3 HR)	52128	MON, WED	MEN'S THURSDAY COMP (3 HR)	51879	THURSDAY
MEN'S REC BLUE (1 HR)	52129	MON, WED			
COED REC RED (1 HR)	52130	MON, WED			
COED COMP RED (3 HR)	52131	MON, WED			
COED COMP BLUE (3 HR)	52132	MON, WED			
COED REC BLUE (1 HR)	52133	MON, WED			
MEN'S COMP SILVER (3 HR)	52151	TUE, THUR			
MEN'S COMP GOLD(3 HR)	52152	TUE, THUR			
MEN'S REC GOLD (1 HR)	52153	TUE, THUR			
CHURCH COMP SILVER (3 HR)	52154	TUE, THUR			
COED REC SILVER (1 HR)	52155	TUE, THUR			
WOMEN'S COMP GOLD (3 HR)	52156	TUE, THUR			
COED COMP GOLD (3 HR)	52157	TUE, THUR			
MEN'S REC SILVER (1 HR)	52158	TUE, THUR			

KENNWORTH PARK 770-528-8896 Coordinator – Kim Cammons Kim.cammons@cobbcounty.org		
	BARCODE	DAYS PLAYED
MEN'S COMP RED (3 HR)	51759	TUESDAY
MEN'S COMP GOLD (3 HR)	51760	MONDAY
FRIDAY MEN'S COMP (3 HR)	51761	FRIDAY
MEN'S CHURCH COMP (3 HR)	51762	TUESDAY
COED COMP (3 HR)	51763	WEDNESDAY

NICKAJACK PARK 770-528-8823 Coordinator – Derrell Walker Derrell.walker@cobbcounty.org		
	BARCODE	DAYS PLAYED
MEN'S MAJOR BLUE (5 HR)	51764	<u>TUE</u> , FRI
MEN'S COMP BLUE(3 HR)	51765	<u>TUE</u> , FRI
MEN'S COMP RED (3 HR)	51766	<u>WED</u> , FRI
COED COMP RED (3 HR)	51767	<u>THUR</u> , FRI
COED REC RED (1 HR)	51768	<u>THUR</u> , FRI
CBEYOND	51769	<u>WED</u> , FRI
TRINITY VINEYARD	51770	MON, FRI

TERRELL MILL PARK 770-591-3160 Coordinator – Andrea Raiford Andrea.raiford@cobbcounty.org		
	BARCODE	DAYS PLAYED
MEN'S MAJOR (5 HR)	51827	TUESDAY
MEN'S COMP MON (3 HR)	51828	MONDAY
MEN'S COMP THUR (3 HR)	51829	THURSDAY
MEN'S COMP FRIDAY (3 HR)	51830	FRIDAY
COED COMP (3 HR)	51831	WEDNESDAY

ADULT SPRING/SUMMER 2012 SOFTBALL LEAGUE ENTRY FORM

CHECK ONE:

RETURNING TEAM TO SAME LEAGUE

NEW TEAM

CHECK ONE:

RESIDENT TEAM

NON-RESIDENT TEAM

Team Name: _____ Park/League Last Year: _____

Team Name Last Year: _____ E-Mail Address: _____

Manager * _____ Home Phone* _____ Work Phone* _____

Address:* _____ Cell Phone _____

Street/Apt #

City

State

Zip

Asst. Mgr.* _____ Home Phone* _____ Work/Cell* _____

Third Contact:* _____ Home Phone* _____ Work/Cell* _____

* THIS INFORMATION MUST BE COMPLETE BEFORE YOUR REGISTRATION CAN BE ACCEPTED. PLEASE REMEMBER TO INCLUDE APARTMENT NUMBERS.

NOTE: ALL OPEN LEAGUE SLOTS WILL BE CONSIDERED HELD BY THE MANAGER, ALL CHURCH LEAGUE SLOTS HELD BY THE CHURCH, AND ALL INDUSTRIAL SLOTS HELD BY THE COMPANY UNLESS YOU INDICATE OTHERWISE BELOW: _____ MANAGER: _____ CHURCH: _____ SPONSOR/COMPANY

LEAGUE INFORMATION

Returning teams to same league check line for last year's league.

Returning teams requesting transfer place number (1) next to first preference, (2) next to second, etc

New teams place number (1) next to first preference, (2) next to second choice, etc.

AL BISHOP	BC#
MEN'S REC RED (1 HR)	52125
MEN'S COMP RED (3 HR)	52126
MEN'S COMP BLUE (3 HR)	52128
MEN'S REC BLUE (1 HR)	52129
COED REC RED (1 HR)	52130
COED COMP RED (3 HR)	52131
COED COMP BLUE (3 HR)	52132
COED REC BLUE (1 HR)	52133
MEN'S COMP SILVER (3 HR)	52151
MEN'S COMP GOLD (3 HR)	52152
MEN'S REC GOLD (1 HR)	52153
CHURCH COMP SILVER (3 HR)	52154
COED REC SILVER (1 HR)	52155
WOMEN'S COMP (3 HR)	52156
COED COMP GOLD (3 HR)	52157
MEN'S REC SILVER (1 HR)	52158

BELLS FERRY	BC#
MEN'S MON COMP	51877
COED COMPETITIVE	51878
MEN'S THUR COMP	51879

KENNWORTH	BC#
MEN'S COMP RED	51759
MEN'S COMP GOLD	51760
FRIDAY MEN'S COMP	51761
CHURCH COMP	51762
COED COMPETITIVE	51763

NICKAJACK	BC#
MEN'S MAJOR	51764
MEN'S COMP	51765
MEN'S COMP	51766
COED COMP	51767
COED RECREATION	51768
CBeyond	51769
TRINITY VINEYARD	51770

TERRELL MILL	
MEN'S MAJOR	51827
MEN'S COMP - Mon.	51828
MEN'S COMP- Thur.	51829
MEN'S COMP - Fri.	51830
COED COMPETITIVE	51831

AMOUNT DUE: \$400.00 AMOUNT PAID: _____ VISA OR MasterCard Check #: _____ DATE: _____

PAYING WITH A CHECK REQUIRES A DRIVER'S LICENSE #

MAKE ONE (1) CHECK PAYABLE TO CCPRCAD

2012 OFFICIAL SOFTBALL ROSTER

TEAM NAME _____ **LEAGUE/PARK:** _____ **MANAGER OR MINISTER SIGNATURE** _____
DIVISION: **MEN'S** _____ **WOMEN'S** _____ **COED** _____ **CHURCH** _____ **RESIDENT TEAM** _____ **NON-RESIDENT** _____

The following players will represent my team in the 2012 Spring/Summer Adult Softball League. These players have agreed to abide by the agreement on the reverse side of this roster, all the rules as outlined in the Constitution and By-laws governing the league, and all policies set up by the Cobb County Recreation Commission. I also understand that if this roster is found to be illegal that this team will be immediately dropped from the league with no refund.

RELEASE AND HOLD HARMLESS AGREEMENT PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the Cobb County Parks, Recreation and Cultural Affairs department, I am, to the best of my knowledge, in good health and able to participate in the program. I authorize the staff of the Cobb County Parks, Recreation and Cultural Affairs Department to organize any required medical or first aid procedure, or to take the undersigned to a hospital emergency room for treatment. If any treatment is required, I understand that every effort will be made to notify the individual indicated as emergency contact beforehand by telephone.

The Undersigned hereby forever releases, discharges, and covenants to hold harmless the Cobb County Parks, Recreation and Cultural Affairs Department, the Cobb County recreation Commission, the Cobb Arts Commission, the Cobb County Board of Commissioners and Cobb County, Georgia and any other person, firm, or corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors, and assignees from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or arising out of any act or occurrence in connection with and particularly on account of all personal injury disability, property damage, loss of damages of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreation program sponsored by the Cobb County Parks, Recreation and Cultural Affairs Department. The undersigned hereby bind their heirs, administrators, executors and successors. Further, this Agreement shall apply to all unknown and unanticipated injuries and damages directly or indirectly resulting here-from. This Release and Hold Harmless Agreement shall constitute a full and complete release of any and all claims.

*** - SIGNATURE OF PARENT REQUIRED FOR PERSONS UNDER 18 YEARS OF AGE.**

AGE	NAME	HOME ADDRESS (Street, City, State, Zip)	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY & COUNTY TAXES?	SIGNATURE
1.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
2.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
3.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
4.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
5.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
6.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
7.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

TEAM NAME: _____ PARK & LEAGUE: _____

AGE	NAME	HOME ADDRESS <i>(Street, City, State, Zip)</i>	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY & COUNTY TAXES?	SIGNATURE
	8.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	9.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	10.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	11.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	12.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	13.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	14.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	15.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	16.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	17.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	18.		COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

TEAM NAME: _____ PARK & LEAGUE: _____

AGE	NAME	HOME ADDRESS (Street, City, State, Zip)	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY & COUNTY TAXES?	SIGNATURE
19.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
20.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
21.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
22.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
23.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
24.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
25.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

ROSTER LIMIT – 25 (USE BOTTOM 3 TO REPLACE ORIGINAL PLAYERS IF SPACE IS NOT AVAILABLE)

1.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
2.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
3.			COUNTY _____	
			CITY & COUNTY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

NOTE Players must be present to be added to this roster. All players are subject to I.D. checks if requested by the park supervisor/scorekeeper.